ST	AT	E OF INDIANA	)	PRINT THE NAME OF THE COUNTY WHERE YOU ARE FILING THESE PAPERS SUPERIOR/CIRCUIT COURT
CC	)UN	PRINT THE NAME OF THE COUNTY WHERE YOU ARE FILING THESE PAPERS	) SS: )	CASE NO
IN	RE	THE MARRIAGE OF:		
		OUR CURRENT FULL NAME. E THE PETITIONER		
		ner,		
V.				
		OUR SPOUSE'S FULL NAME. IS THE RESPONDENT		
Re	spo	ndent.		
		APPEARANCE BY	SELF	F-REPRESENTED PERSON IN CIVIL CASE
		This Appearance For	m mus	st be filed on behalf of every party in a civil case.
	1.	My Name is:PRIN	T YOUR	FULL NAME and I am
		Initiating (filing) X; Responding (answering or of Intervening;	lefendi	ing); or
in	this	case and am representing my	self.	
pro pro	ourt otec ovid	Rules: (NOTE: If you are the tion from abuse order, a wor	e Initia kplace of lega	legal service of documents and case information is required by ating party and this case, or a related case, involves a violence restraining order, or a no-contact order, you must all service of documents but that address should not be one that
		Address: PRINT YOUR FULL ADD	DRESS	
		Email Address: PRINT YOUR E	MBER	DRESS
		FAX: PRINT YOUR FAX NUMBER	?	
		in the related case, you have clow:	used t	he Attorney General Confidential address, you may check the
IF YOU USE A CONFIDENTIAL ADDRESS THROUGH THE OFFICE OF THE ATTORNEY GENERAL	1	Attorney General confidents		al address (contact the Attorney General at 1-800-321-1907 or tg.state.in.us).
GENERAL, CHECK HERE	3.	This is a <u>LEAVE BLANK</u> case to (Clerk will supply this infor		defined in administrative Rule 8(B)(3).
	4.	I will accept service by FAX	X at the	e following number TO RECEIVE COURT PAPERS, PRINT IT HERE

delinquency, Child in Need of Services (CH support may be an issue, and social security	ter, involves reciprocal enforcement of support, paternity, INS), guardianship, or any other proceedings in which numbers of all family members are supplied on a separately led as confidential information on light green paper.				
X Yes No 6. There are related cases: Yes No					
Caption and case number of related cases:					
IF YOU CHECKED "NO" FOR #6, SKIP. IF YOU CHECKED "YES" FOR #6, PRINT THE CAPTION AND CASE NUMBER FOR EACH RELATED CASE	Case Number:				
Caption:	Case Number:				
Caption:	Case Number:				
Caption:	Case Number:				
Caption:	Case Number:				
Caption:	Case Number:				
7. Additional information required by local rule:  IF NECESSARY, PRINT ADDITIONAL INFORMATION REQUIRED BY YOUR COUNTY'S LOCAL RULES  SIGN YOUR NAME					
	Self-Represented Party				

# NOT FOR PUBLIC ACCESS IN ACCORDANCE WITH ADMINISTRATIVE RULE 9

ATTENTION CLERK: FOR SELF REPRESENTED LITIGANTS, TREAT THIS FORM AS IF IT IS PRINTED ON LIGHT GREEN PAPER

ATTORNEYS MUST SUBMIT THIS FORM ON LIGHT GREEN PAPER. SEE BOTTOM OF PAGE FOR TEXT OF TRIAL RULE 5 (G) (2) ) IN THE \_\_\_\_\_SUPERIOR/CIRCUIT COURT STATE OF INDIANA ) SS: COUNTY OF CASE NO. \_\_\_\_ IN RE THE MARRIAGE OF Petitioner. FOR THE SECTION ABOVE THE DOTTED LINE, LOOK AT THE COURT PAPERS YOU HAVE FROM THIS CASE AND COPY THE INFORMATION HERE AS IT APPEARS ON THOSE COURT PAPERS. V. Respondent.

CIVIL APPEARANCE FORM Item 5 (Social Security numbers of all family members in cases involving support): PRINT THE NAME AND SOCIAL SECURITY NUMBER OF EACH MINOR CHILD YOU HAVE WITH THE OTHER PARTY WITH WHOM YOU ARE PAYING CHILD SUPPORT SS# Name: SS# Name: SS # \_\_\_\_ Name: SS # \_\_\_\_\_ Name: SS # Name: Name: SS# SS# Name: **Item 8** (Social Security number of person who is subject to involuntary commitment): Name: SS # When only a portion of a document contains information excluded from public access pursuant to

Administrative Rule 9(G)(1), said information shall be omitted [or redacted] from the filed document and set forth on a separate accompanying document on **light green paper** conspicuously marked "Not For Public Access" and clearly designating [or identifying] the caption and number of the case and the document and location within the document to which the redacted material pertains.

**NOT FOR PUBLIC ACCESS** 

INS	TRUCTIONS		DIVORCE WITH CHILDREN AND WITHOUT AN AGREEMENT ON ALL ISSUES
	TE OF INDIANA	) SS:	SUPERIOR/CIRCUIT COURT
IN RI	E THE MARRIAGE OF:		
Petitie V.	oner,	TI	OR THE SECTION ABOVE THE DOTTED LINE, LOOK AT HE APPEARANCE YOU JUST FILLED OUT AND PRINT THE FORMATION HERE AS IT APPEARS ON THE APPEARANCE
Respo	ondent.		
			DISSOLUTION OF MARRIAGE PROVISIONAL ORDERS
The P	Petitioner, PRINT YOUR		
1.	Petitioner and Respondent version of the Month and Year that you separated	were married on PRIN	IT THE DAY, MONTH AND R THAT YOU WERE MARRIEDING separated on
2.	PRINT THE NAME OF THE PERSO THE COUNTY FOR THE LAST THR County for the last 3 month		R SPOUSE) WHO HAS LIVED IN PRINT THE NAME OF THE COUNTY ON A CONTINUOUS RESIDENT OF WHERE YOU ARE FILING THESE PAPERS
3.		N (EITHER YOU OR YOU! LAST SIX MONTHS.has	R SPOUSE) WHO HAS LIVED IN been a continuous resident of the State of Indiana for the
4.	last 6 months. PRINT THE NUMBER OF MINOR CHILDREN THAT YOU AND THE OTHER PARTY HAVE TOGETHER	children of the	marriage; namely:
	<u>Name</u>		Date of birth
	PRINT THE NAME AND DATE	OF BIRTH OF EACH CHILD	OU HAVE WITH YOUR SPOUSE
_	PRINT THE NAME OF THE PAR	ENT YOU WANT TO	
5.	That HAVE CUSTODY OF THE CHILD	REN 1S fi	t and proper person to have custody of the minor

children.

6.	Debts	and property:	
IF THERE ARE NO DEBTS OR PROPERTY TO DIVIDE CHECK THE FIRST BOX.	≣, <b>\</b>	There are no debts / personal property to divide.	
THERE IS PROPERTY THAT YOUR SPOUSE HAS THAT	AT 🕽 🦳	Petitioner wishes the Court to divide the following debts / personal propert	V:
YOU WANT OR DEBTS THE YOU OWE THAT YOU THIS	IAT C	a.	
YOUR SPOUSE SHOULD CHECK THE SECOND BO	PAY,	b.	
AND LIST THE ITEMS.		C.	
		d.	
7.	PRINT TH	E NAME OF THE WIFE IF SHE IS NOT PREGNANT is not pregnant.	
8.	Neithe	r party is a member of the military.	
9.	This m	narriage has suffered an irretrievable breakdown and should be dissolved.	
10.	Chang	e of name:	
IF YOU ARE THE HUSBAN YOU MUST LEAVE THIS	ID, $\prod$		restored to her.
BLANK. IF YOU ARE THE WIFE, CHECK THE APPROPRIATE BOX		Wife does not want to change her name.	
	I reque	est that this Court issue its order dissolving the marriage of the parties, and f	for all other just and
proper	relief a	nd until this matter is finalized, I request the following provisional orders:	
PROVISIONAL ORDERS ARE		Temporary custody of the minor child(ren);	
TEMPORARY ORDERS THAT WILL BE IN	S	Temporary child support for minor child(ren);	
EFFECT WHILE YOU ARE WAITING		Temporary parenting time (visitation) for the non-custodial parent;	
FOR YOUR FINAL HEARING.		Temporary possession of the marital residence;	
HEARING.		Temporary division of debts;	
IF YOU DO NOT NEED PROVISIONAL		Temporary division of property;	
ORDERS, CHECK THE FIRST BOX AND DO		Spousal maintenance;	
NOT FILE THE NOTICE OF PROVISIONAL HEARING OR THE		Restraining the parties from removing the child(ren) from the state without court or all parties;	t the permission of the
TEMPORARY ORDER WITH THE COURT.		Restraining the parties from transferring, encumbering, concealing, or in an any of the property of the part;	ny way disposing of
YOU SHOULD CONTACT AN ATTORNEY OR		Other:	
CONSULT A LEGAL DIC		Y IF YOU DO NOT UNDERSTAND THESE TERMS. A SEPARATE	
		OTECTIVE ORDER INVOLVING DOMESTIC VIOLENCE, AND ATE CASE. IF YOU ARE SEEKING A PROTECTIVE ORDER, YOU	
MAY OBTAIN A FORM F	FROM TH	IE CLERK OF THE COURT OR OBTAIN IT FROM THE INDIANA AT http://www.in.gov/judiciary/forms/po.html.	

# DIVORCE WITH CHILDREN AND WITHOUT AN AGREEMENT ON ALL ISSUES

I affirm under the penalties of perjury that the foregoing representations are true.

SIGN YOUR NAME	
Signature	
PRINT YOUR FULL NAME	
PRINT YOUR STREET ADDRESS	
PRINT YOUR CITY, STATE AND ZIP CODE	

#### CERTIFICATE OF SERVICE

I hereby certify that I sent a	copy of this Petition b	by first class mail	to the opposing attorney.	, or the
opposing party if the opposing party	y is not represented by	an attorney, on P	RINT THE DATE YOU WILL FILE THE	E FORMS

SIGN YOUR NAME	
Signature	

INSTRUCTIONS		AN AGREEMENT ON ALL ISSUES				
STATE OF INDIANA		SUPERIOR/CIRCUIT COURT				
COUNTY OF	) SS: ) CASE N	NO				
IN RE THE MARRIAGE OF:						
Petitioner,		FOR THE SECTION ABOVE THE DOTTED LINE, LOOK AT THE APPEARANCE YOU JUST FILLED OUT AND PRINT THE				
V. DO NOT FILE THIS F	INFORMATION HERE AS IT APPEARS ON THE APPEARANCE DO NOT FILE THIS FORM IF YOU DO NOT NEED PROVISIONAL ORDERS					
Respondent.						
	NOTICE OF PR	ROVISIONAL HEARING				
		iage and Request for Provisional Orders has been filed in t				
Court. The Court now sets this m	natter for a Provision	ional Hearing on at				
A.M./P.M. The Parties may prese	ent evidence on the	neir behalf. Failure to appear may result in matters being				
decided in your absence.						
So ordered thisday	y of	, 20				
Date		Judge				
Distribution:						
PRINT YOUR FULL NAME PRINT YOUR STREET ADDRESS PRINT YOUR CITY, STATE AND ZIP CODE						
PRINT YOUR SPOUSE'S FULL NAME PRINT YOUR SPOUSE'S STREET ADDRES	 SS					

PRINT YOUR SPOUSE'S CITY, STATE AND ZIP CODE

COUNTY OF
Petitioner,  FOR THE SECTION ABOVE THE DOTTED LINE, LOOK AT THE APPEARANCE YOU JUST FILLED OUT AND PRINT THE INFORMATION HERE AS IT APPEARS ON THE APPEARANCE  DO NOT FILE THIS FORM IF YOU DO NOT NEED PROVISIONAL ORDERS
THE APPEARANCE YOU JUST FILLED OUT AND PRINT THE INFORMATION HERE AS IT APPEARS ON THE APPEARANCE  DO NOT FILE THIS FORM IF YOU DO NOT NEED PROVISIONAL ORDERS
V.  DO NOT FILE THIS FORM IF YOU DO NOT NEED PROVISIONAL ORDERS
Respondent.
TEMPORARY ORDER
Petitioner appears/does not appear, and Respondent appears/does not appear for provisional hearing on
, 20 The court having been duly advised in this matter, now finds the following
Petitioner/Respondent is awarded temporary custody of the minor child(ren);
Petitioner/Respondent shall pay temporary child support for the minor child(ren)
in the amount of \$ per week, payable through the
County Clerk, or by income withholding order if available from the employer, beginning
on
Petitioner/Respondent shall be responsible for the first \$ of
uninsured medical expenses for the minor child(ren). Thereafter, Petitioner shall be
responsible for% and Respondent for% of uninsured medical
expenses for the minor child(ren).
Petitioner/Respondent shall have temporary parenting time (visitation) with the minor
child(ren) as the parties agree or according to the Indiana Parenting Time (Visitation)
guidelines;
Petitioner/respondent shall have temporary possession of the marital residence;
Petitioner/Respondent shall temporarily maintain medical, dental, and optical insurance
as available through employment for the following persons:

 here shall be a temporary division of debts, as follows:	
Petitioner shall be solely responsible for the following debts:	
Respondent shall be solely responsible for the following debts:	
 here shall be a temporary division of property, as follows:	
Petitioner shall have sole possession of the following items of prop	erty:
Respondent shall have sole possession of the following items of pr	operty:
here shall be a temporary division of motor vehicles, as follows:	
 Petitioner shall have temporary possession of the following vehicle	es.
(Vehicle #1, Make, Model, and Year)	
(Vehicle #2, Make, Model and Year)	
Respondent shall have temporary possession of the following vehice	cles:
(Vehicle #1, Make, Model, and Year)	
(Vehicle #2, Make, Model and Year)	

There shall be	e a temporary restraining order in effect during these proce	edings:
	Restraining the parties from removing the child(ren) from	n the state witho
	the permission of the court or all parties;	
	Restraining the parties from transferring, encumbering, o	or concealing, or
	in any way disposing of any of the property of the parties	3.
	Other:	
ALL OF WHICH IS	SO ORDERED THIS DAY OF	, 20
Date	Judge	
Distribution:		
ODINIT VOLID FULL NAME		
PRINT YOUR FULL NAME PRINT YOUR STREET ADDRESS		
PRINT YOUR CITY, STATE AND ZIP CODE		
THINT TOOK OFFI, O'INTEANS ZII OOBE		
PRINT YOUR SPOUSE'S FULL NAME		
PRINT YOUR SPOUSE'S STREET ADDRESS		
PRINT YOUR SPOUSE'S CITY, STATE AND ZIP	CODE	

INSTRUCTIONS	DIVORCE WITH CHILDREN AND WITHOUT AN AGREEMENT ON ALL ISSUES			
STATE OF INDIANA	) IN THE SUPERIOR/CIRCUIT COURT			
COUNTY OF	) SS: ) CASE NO			
IN RE THE MARRIAGE OF:				
Petitioner,	FOR THE SECTION ABOVE THE DOTTED LINE, LOOK AT			
V.	THE APPEARANCE YOU JUST FILLED OUT AND PRINT THE INFORMATION HERE AS IT APPEARS ON THE APPEARANCE			
Respondent.	_			
	MOTION FOR FINAL HEARING			
The Petitioner now states that	at sixty (60) days have passed since the filing of the Verified Petition for			
Dissolution of Marriage and request	es that this matter be set for Final Hearing on the next available hearing date			
allowing fifteen (15) minutes for the hearing. [If you need more than 15 minutes, please advise the Court wher				
you file this Motion.]				
	SIGN YOUR NAME			
	Signature			
	PRINT YOUR FULL NAME			
	PRINT YOUR STREET ADDRESS			
	PRINT YOUR CITY, STATE AND ZIP CODE			
CERTIFICATE OF SERVICE				
I certify that I have served a	copy of the foregoing on the Respondent by first class mail on			
PRINT THE DATE YOU WILL FILE THE FORMS				
	Signature			

#### **DIVORCE WITH CHILDREN AND WITHOUT INSTRUCTIONS** AN AGREEMENT ON ALL ISSUES IN THE \_\_\_\_\_ SUPERIOR/CIRCUIT COURT STATE OF INDIANA ) SS: COUNTY OF CASE NO. IN RE THE MARRIAGE OF: Petitioner, FOR THE SECTION ABOVE THE DOTTED LINE. LOOK AT THE APPEARANCE YOU JUST FILLED OUT AND PRINT THE V. INFORMATION HERE AS IT APPEARS ON THE APPEARANCE Respondent. \_\_\_\_\_\_ NOTICE OF FINAL HEARING The Petitioner has filed a Motion For a Final Hearing which the Court has considered and now grants. IT IS THEREFORE ORDERED that the final hearing for this matter shall be held on the \_\_\_\_\_ da of , at the hour of o'clock .M. [The Court allows 15 minutes for the hearing.] [The Court allows for the hearing.] So ordered this day of , 20 . Judge Distribution: PRINT YOUR FULL NAME PRINT YOUR STREET ADDRESS

PRINT YOUR CITY, STATE AND ZIP CODE

PRINT YOUR SPOUSE'S CITY, STATE AND ZIP CODE

PRINT YOUR SPOUSE'S FULL NAME
PRINT YOUR SPOUSE'S STREET ADDRESS

INSTRUCTIONS	DIVORCE WITH CHILDREN AND WITHOUT AN AGREEMENT ON ALL ISSUES
STATE OF INDIANA	) IN THE SUPERIOR/CIRCUIT COURT ) SS:
COUNTY OF	CASE NO
IN RE THE MARRIAGE OF:	
Petitioner,	FOR THE SECTION ABOVE THE DOTTED LINE, LOOK AT
V.	THE APPEARANCE YOU JUST FILLED OUT AND PRINT THE INFORMATION HERE AS IT APPEARS ON THE APPEARANCE
Respondent.	_
	REE OF DISSOLUTION OF MARRIAGE
The Court having reviewed	he Verified Petition for Dissolution of Marriage and having held a final
hearing in this matter, now finds the	following:
1. The parties were married on	PRINT THE DAY, MONTH AND YEAR THAT YOU WERE MARRIED and separated on THAT YOU SEPARATED.
PRINT THE NAME OF THE PERSON HAS LIVED IN THE COUNTY FOR THE	(EITHER YOU OR YOUR SPOUSE) WHO LAST THREE MONTHS. has been a continuous resident of
PRINT THE NAME OF THE COUNTY WHERE YOU ARE FILING THESE PAPERS County for	the last three months, and the State of Indiana for the last six months prior
to the filing of the Verified Petition	for Dissolution of Marriage.
3. PRINT THE NAME OF THE WIFE IF SHE	is not pregnant.
4. Neither party is a member o	·
CHILDREN THAT YOU A	ND YOUR HER children born of this marriage; namely;
Name	Date of birth
PRINT THE NAME AND DATE	OF BIRTH OF EACH CHILD YOU HAVE WITH YOUR SPOUSE
THE FINAL HEARI	FILL OUT THE REMAINDER OF THIS FORM AFTER IG HAS BEEN HELD
6. The parties agree and state t	nat it is in the best interest of the child(ren) that:
Petitioner shall have	sole physical and legal custody of the child(ren).
Respondent shall have	re sole physical and legal custody of the child(ren).

	Petitioner shall have sole physical custody and the parties shall have joint legal custody of the
	child(ren)
	Respondent shall have sole physical custody and the parties shall have joint legal custody of the
	child(ren).
	Other: (please describe in detail)
7. Pare	nting Time (Visitation) with the minor child(ren) shall be as follows:
	Petitioner shall have reasonable parenting time (visitation) with the minor child(ren) as the
	parties agree or according to the Indiana Parenting Time (visitation) guidelines.
	Respondent shall have reasonable parenting time (visitation) with the minor child(ren) as the
	parties agree or according to the Indiana Parenting Time (visitation) guidelines.
	Other: We have agreed to a different parenting time (visitation) that does <b>NOT</b> follow the
	Indiana Parenting Time (Visitation) Guidelines. (please describe in detail)
3.	will pay child support in the amount of \$ per
week, as sho	wn by the attached child support worksheet, through the County Clerk's office, or by income
withholding	order if available from the employer, beginning on the first Friday following the date of the decree
Said date is	The custodial parent,, will be
responsible	for the first \$ of uninsured medical expenses for the minor child(ren).
Γhereafter, l	Father shall be responsible for% of uninsured medical expenses, and Mother shall be
esponsible	for% of uninsured medical expenses for the minor child(ren).
	will be responsible to pay the Administrative Fee that the Clerk charges
annually.	

9.	The pa	arties have agreed on the following provision	s for health insurance maintenance:		
		shall maintai	n medical, dental, and optical insurance as available		
	throug	h employment for the minor children:			
10.	The pa	arties have agreed on the following arrangem	ent for claiming the tax credits, exemptions, and		
deduc	tions for	the minor child(ren):			
		Petitioner shall be entitled to claim the min-	or child(ren) for federal, state, and local income tax		
		purposes on an annual basis; Respondent sh	nall sign all necessary documents that will entitle		
		Petitioner to do so.			
		Respondent shall be entitled to claim the m	inor child(ren) for federal, state, and local income tay		
	purposes on an annual basis; Petitioner shall sign all necessary documents that will entitle				
	Respondent to do so.				
		Petitioner and Respondent shall each be ent	citled to claim the minor child(ren) for federal, state,		
		and local income tax purposes in alternating	g years; Petitioner shall be entitled to claim the minc		
		child(ren) in the year, and every	even/odd year thereafter; Respondent shall be entitle		
		to claim the minor child(ren) in the year	, and every even/odd year thereafter.		
11.	The pa	arties have agreed on the following debt divis	sion:		
	The parties already have divided their debts.				
Petitioner will be solely responsible for and shall hold Respondent harmless from debts:		shall hold Respondent harmless from, the following			
		debts:			
		Name of Creditor	Amount of Debt		
			\$		
			\$		
			\$		

	Name of Creditor	Amount of Debt	
		\$	
		\$	
		\$	
The par	rties have agreed on the following vehicle	e division:	
	There are no vehicles to divide.		
	Petitioner will have sole possession of th	e following vehicles, and Respondent	shall exec
	documents necessary to transfer title of s	aid vehicles within thirty (30) days of	the date of
	Order:		
	Vehicle #1, Make, Model, and Year		
	Vehicle #2, Make, Model, and Year		
	D	4. C.11 1. 1 1. D.47	.111
	Respondent will have sole possession of		
	documents necessary to transfer title of s	and vehicles within thirty (30) days of	the date of
	Order:		
	Vehicle #1, Make, Model, and Year		
	V/ 1 1 1/2 26 1 26 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	Vehicle #2, Make, Model, and Year		
The par	rties have agreed on the following proper	ty division:	
	The parties already have divided all item	s of property.	
	Petitioner will have sole possession of th	e following items of property:	

		Respondent will have sole possession of the following items of	property:
14.	The m	marriage has suffered an irretrievable breakdown and should be di	ssolved.
15.	Chang	nge of names:	
		Wife would like her maiden name or previous married name of	
			restored to her.
		Wife does not want to change her name.	
	IT IS	S THEREFORE ORDERED by the Court that the parties' marria	age is hereby dissolved.
	Date	Judge	
Distr	ibution:	1:	
PRINT	YOUR FULI	ULL NAME	
PRINT	YOUR STR	TREET ADDRESS	
PRINT	YOUR CITY	ITY, STATE AND ZIP CODE	
PRINT	YOUR SPO	POUSE'S FULL NAME	
		POUSE'S STREET ADDRESS	
PRINT	YOUR SPO	POUSE'S CITY STATE AND ZIP CODE	

#### **DIVORCE WITH CHILDREN AND WITHOUT INSTRUCTIONS** AN AGREEMENT ON ALL ISSUES IN THE \_\_\_\_\_ SUPERIOR/CIRCUIT COURT STATE OF INDIANA ) SS: COUNTY OF CASE NO. IN RE THE MARRIAGE OF: Petitioner, FOR THE SECTION ABOVE THE DOTTED LINE, LOOK AT THE APPEARANCE YOU JUST FILLED OUT AND PRINT THE V. INFORMATION HERE AS IT APPEARS ON THE APPEARANCE Respondent. **SUMMONS** [For Dissolution of Marriage Cases Only] The State of Indiana to Respondent: PRINT YOUR SPOUSE'S FULL NAME PRINT YOUR SPOUSE'S STREET ADDRESS PRINT YOUR SPOUSE'S CITY, STATE AND ZIP CODE You have been sued by your spouse for dissolution of your marriage. The case is pending in the Court named above. In order to participate in the proceedings, you must enter a written appearance in person or by your attorney. In the event you do not enter a written appearance within sixty (60) days of the date hereof, your marriage can be dissolved by Decree of the Court by default. In the event a Decree is entered by default, it may contain a judgment against you and provisions regarding the custody of your child/children, support for your child/children, parenting time (visitation) with your child/children, distribution of assets, and payment of debts. The Decree may also require you to take actions or refrain from actions in order to carry out the terms of the Court's Decree. If you do not enter a written appearance, you will receive no further notice of these proceedings. If you wish to countersue, you must do so by written petition filed herein not more than sixty (60) days from the date hereof Dated: County The following manner of Service of Summons is hereby designated: Registered / Certified Mail to be sent by the Clerk ADDITIONAL CHARGE FOR Service by Sheriff on Individual at address shown above

Service by Sheriff at place of employment, (name and address of spouse's employer):

SERVICE BY SHERIFF, TALK TO CLERK

ABOUT AMOUNT YOU WILL BE CHARGED

## DIVORCE WITH CHILDREN AND WITHOUT AN AGREEMENT ON ALL ISSUES

#### SHERIFF'S RETURN OF SERVICE OF SUMMONS

I hereby cer	tify that I have served this	summons on the	day of		_, 20:	
1.	By delivering a copy o	f the Summons and a c	copy of the con	nplaint to the R	espondent ident	ified
on the first p	page of Summons.					
2.	By leaving a copy of th	ne Summons and a cop	y of the compl	aint at		
		, which is the	he dwelling pla	ce or usual pla	ce of abode of a	nd b
mailing a co	ppy of the Summons to the	Respondent at the abo	ove address.			
3.	Other Service or Rema	rks:				
_	Sheriff's Costs	Sheriff By:	Deputy			
	CLI	ERK'S CERTIFICAT				
I her	reby certify that on the				copy of this Sum	ımor
	of the Petition to the Resp					
certified ma	il), [ ] requesting a retu	ırn receipt, at the addre	ess provided by	the Petitioner.		
Dated:	, 20		Deputy			
	RETUR	N ON SERVICE OF	SUMMONS B	Y MAIL		
I her	reby certify that the attach	ed receipt was received	d by me showir	ng that the Sum	mons and a cop	y of
the Complai	int mailed to the Responde	ent identified on the 1 <sup>st</sup>	t page of this Si	ummons was a	ccepted by the	
Respondent	on the day of		20			
I her	eby certify that the attach	ed return receipt was r	eceived by me	showing that th	ne Summons and	l a
copy of the	Complaint was returned n	ot accepted on the	day of		, 20	
I her	eby certify that the attach	ed return receipt was re	eceived by me	showing that th	ne Summons and	d a
copy of the	Complaint mailed to the F	despondent identified of	on the 1 <sup>st</sup> page of	of this Summor	ns was accepted	by
	on behalf of	the Respondent on the	e day of			
		By:	Deputy		_	

STATE OF INDIANA	) ) SS:	IN THE	SUPERIOR/CIRCUIT COURT
COUNTY OF	)	CASE NO	
IN RE THE MARRIAGE OF:			
Petitioner,			
V.			
Respondent.			
APPEARANCE BY	<u>SELF</u>	-REPRESENTE	ED PERSON IN CIVIL CASE
This Appearance Form	n mus	st be filed on beh	alf of every party in a civil case.
1. My Name is:			and I am
Initiating (filing) X; Responding (answering or d Intervening;	efendi	ing); or	
in this case and am representing my	self.		
Court Rules: (NOTE: If you are the protection from abuse order, a work	Initia kplace of lega	nting party and thi violence restrain	ocuments and case information is required by is case, or a related case, involves a ing order, or a no-contact order, you must ments but that address should not be one that
Address:			
Email Address:Phone:FAX:			
OR, if in the related case, you have box below:	used t	he Attorney Gene	eral Confidential address, you may check the
Attorney General confidential		*	t the Attorney General at 1-800-321-1907 or
3. This is a case ty (Clerk will supply this inform	-		istrative Rule 8(B)(3).
4. I will accept service by FAX	at the	e following number	er

delinquency, Child in Need of Services (CHI support may be an issue, and social security	ter, involves reciprocal enforcement of support, paternity, INS), guardianship, or any other proceedings in which numbers of all family members are supplied on a separately ed as confidential information on light green paper.
X	
6. There are related cases: YesNo	(If yes, please indicate below.)
Caption and case number of related cases:	
Caption:	Case Number:
7. Additional information required by local	rule:
	Self-Represented Party

# NOT FOR PUBLIC ACCESS IN ACCORDANCE WITH ADMINISTRATIVE RULE 9

ATTENTION CLERK: FOR SELF REPRESENTED LITIGANTS, TREAT THIS FORM AS IF IT IS PRINTED ON LIGHT GREEN PAPER

ATTORNEYS MUST SUBMIT THIS FORM ON LIGHT GREEN PAPER. SEE BOTTOM OF PAGE FOR TEXT OF TRIAL RULE 5 (G) (2)

STATE OF INDIANA		SUPERIOR/CIRCUIT COURT
COUNTY OF	) SS: _ )	
IN RE THE MARRIAGE OF:		
Petitioner,		
V.		
Respondent.	CIVIL APPEARAN	CE FORM
Item 5 (Social Sec	curity numbers of all family n	nembers in cases involving support):
Name:	SS #	
Item 8 (Social Seco	urity number of person who is	subject to involuntary commitment):

When only a portion of a document contains information excluded from public access pursuant to Administrative Rule 9(G)(1), said information shall be omitted [or redacted] from the filed document and set forth on a separate accompanying document on **light green paper** conspicuously marked "Not For Public Access" and clearly designating [or identifying] the caption and number of the case and the document and location within the document to which the redacted material pertains.

#### **NOT FOR PUBLIC ACCESS**

STA	TE OF INDIANA	) IN THE ) SS:	SUPERIOR/CIRCUIT COURT
COUNTY OF			
IN R	RE THE MARRIAGE OF:		
Petit	ioner,		
V.			
	pondent.		
		IED PETITION FOR DISSO AND REQUEST FOR PROV	
The	Petitioner,	, now sta	ates:
1.	Petitioner and Respond	lent were married on	, and separated on
2.			ontinuous resident of
3.	last 6 months.	has been a	continuous resident of the State of Indiana for the
4.	There are	children of the marria	ge; namely:
	<u>Name</u>		Date of birth
5.	Thatchildren.	is fit and p	proper person to have custody of the minor

6.	Debts	and property:
		There are no debts / personal property to divide.
		Petitioner wishes the Court to divide the following debts / personal property:
		a b.
		b c
		d
7.		is not pregnant.
8.	Neith	er party is a member of the military.
9.	This r	marriage has suffered an irretrievable breakdown and should be dissolved.
10.	Chang	ge of name:
		Wife would like her former name of restored to her.
		Wife does not want to change her name.
	I requ	est that this Court issue its order dissolving the marriage of the parties, and for all other just and
prope	er relief	and until this matter is finalized, I request the following provisional orders:
		Temporary custody of the minor child(ren);
		Temporary child support for minor child(ren);
		Temporary parenting time (visitation) for the non-custodial parent;
		Temporary possession of the marital residence;
		Temporary division of debts;
		Temporary division of property;
		Spousal maintenance;
		Restraining the parties from removing the child(ren) from the state without the permission of the court or all parties;
		Restraining the parties from transferring, encumbering, concealing, or in any way disposing of any of the property of the part;
		O(1 - ···

I affirm under the penalties of perjury t	hat the foregoing representations are true.
	Signature
<u>CER1</u>	TIFICATE OF SERVICE
* * *	s Petition by first class mail to the opposing attorney, or the resented by an attorney, on
	Signature

STATE OF INDIANA	)		SUPERIO	R/CIRCUIT COUR	T
COUNTY OF	) SS: . )				
IN RE THE MARRIAGE OF:					
Petitioner,					
V.					
Respondent.					
	<u>NOTIC</u>	E OF PROVISIO	ONAL HEARING		
A Verified Petition for Di	ssolutio	n of Marriage and l	Request for Provision	al Orders has been f	iled in this
Court. The Court now sets this m	natter for	a Provisional Hea	uring on	at	
A.M./P.M. The Parties may preson	ent evide	ence on their behal	f. Failure to appear m	nay result in matters	being
decided in your absence.					
So ordered thisda	y of		, 20		
Date		Judge			
Distribution:					

STATE OF INDIANA	) IN THE	SUP	ERIOR/CIRCUIT C	OURT	
COUNTY OF					
IN RE THE MARRIAGE OF:					
Petitioner,					
V.					
Respondent.					
	TEMPORAR	RY ORDER			
Petitioner appears/does	s not appear, and Responde	ent appears/does no	t appear for provision	nal hearing on	
	0 The court having be	en duly advised in	this matter, now find	s the following:	
Petition	er/Respondent is awarded t	temporary custody	of the minor child(re	en);	
Petition	er/Respondent shall pay ter	mporary child supp	ort for the minor chi	ld(ren)	
in the ar	mount of \$	per week, p	ayable through the _		
County	Clerk, or by income withho	olding order if avai	lable from the emplo	yer, beginning	
_	·,	_	-		
	er/Respondent shall be resp		st \$	of	
	ed medical expenses for the	_			
	ible for% and Re				
_	es for the minor child(ren).				
•	er/Respondent shall have to	emporary parenting	e time (visitation) wit	th the minor	
	en) as the parties agree or ac		, , , , , , , , , , , , , , , , , , ,		
guidelin	, ,	cording to the ma	and rarenting Time	( V ISITUTION)	
<u> </u>	er/respondent shall have te	mnorary nossassio	n of the morital recid	anca:	
<del></del>	er/Respondent shall tempo:	1 7 1		,	
<del></del>	1	•	, , ,	icai msurance	
as availa	able through employment f	or the following pe	ersons:		

There	e shall be a temporary division of debts, as follows:
a.	Petitioner shall be solely responsible for the following debts:
b.	Respondent shall be solely responsible for the following debts:
There	e shall be a temporary division of property, as follows:
a.	Petitioner shall have sole possession of the following items of property:
b.	Respondent shall have sole possession of the following items of property:
There	e shall be a temporary division of motor vehicles, as follows:
a.	Petitioner shall have temporary possession of the following vehicles:
	(Vehicle #1, Make, Model, and Year)
	(Vehicle #2, Make, Model and Year)
b.	Respondent shall have temporary possession of the following vehicles:
	(Vehicle #1, Make, Model, and Year)
	(Vehicle #2, Make, Model and Year)

	There shall be	be a temporary restraining order in effect during these proceed	ings:
		Restraining the parties from removing the child(ren) from t	he state withou
		the permission of the court or all parties;	
		Restraining the parties from transferring, encumbering, or	concealing, or
		in any way disposing of any of the property of the parties;	
		Other:	
AL	L OF WHICH IS	IS SO ORDERED THIS DAY OF	
Date		Judge	
Distribution:			

STATE OF INDIANA	)		SUPERIOR/CIRCUIT COURT
COUNTY OF	) SS: )		·
IN RE THE MARRIAGE OF:			
Petitioner,			
V.			
Respondent.			
	MO	TION FOR	FINAL HEARING
The Petitioner now states th	at sixt	y (60) days h	nave passed since the filing of the Verified Petition for
Dissolution of Marriage and reques	sts that	this matter b	be set for Final Hearing on the next available hearing date
allowing fifteen (15) minutes for th	e hear	ing. [If you i	need more than 15 minutes, please advise the Court when
you file this Motion.]			
<del>.</del>			
		Si	ignature
		_	
	<u>C</u> :	<b>ERTIFICA</b>	TE OF SERVICE
I certify that I have served a	і сору	of the forego	oing on the Respondent by first class mail on
		Si	ignature

STATE OF INDIANA	)	IN THE _		SUPERIOR/CIRCUIT COURT
COUNTY OF	) SS: )	CASE NO.	•	
IN RE THE MARRIAGE OF:				
Petitioner,				
V.				
Respondent.				
	<u>NO</u>	TICE OF I	FINAL HEA	ARING
The Petitioner has filed	a Motion F	For a Final F	learing whic	ch the Court has considered and now grants.
IT IS THEREFORE (	ORDERED	that the fin	al hearing fo	or this matter shall be held on the day
of,	at the hou	r of	o'clock	M. [The Court allows 15 minutes for the
hearing.] [The Court allows _		for the he	earing.]	
So ordered this	_ day of		, 20	_•
		Judge		
Distribution:				

STATE OF INDIANA		SUPERIOR/CIRCUIT COURT
COUNTY OF	) SS: )	
IN RE THE MARRIAGE OF:		
Petitioner,		
V.		
Respondent.		
<u>I</u>	DECREE OF DISSOLU	UTION OF MARRIAGE
The Court having review	ved the Verified Petition	for Dissolution of Marriage and having held a final
hearing in this matter, now finds	s the following:	
1. The parties were married	d on	, and separated on
2.		has been a continuous resident of
County	for the last three months	s, and the State of Indiana for the last six months prior
to the filing of the Verified Petin	tion for Dissolution of M	larriage.
3.		is not pregnant.
4. Neither party is a memb	er of the military.	
5. There were	children born	of this marriage; namely;
<u>Name</u>		Date of birth
		·
6. The parties agree and sta	ate that it is in the best in	aterest of the child(ren) that:
<u> </u>		gal custody of the child(ren).
		legal custody of the child(ren).

		Petitioner shall have sole physical custody and the parties shall have joint legal custody of the
		child(ren)
		Respondent shall have sole physical custody and the parties shall have joint legal custody of the
		child(ren).
		Other: (please describe in detail)
7	Domont	ing Time (Visitation) with the minor child(non) shall be as follows:
7.	Parent	ing Time (Visitation) with the minor child(ren) shall be as follows:
		Petitioner shall have reasonable parenting time (visitation) with the minor child(ren) as the
		parties agree or according to the Indiana Parenting Time (visitation) guidelines.
		Respondent shall have reasonable parenting time (visitation) with the minor child(ren) as the
		parties agree or according to the Indiana Parenting Time (visitation) guidelines.
		Other: We have agreed to a different parenting time (visitation) that does <b>NOT</b> follow the
		Indiana Parenting Time (Visitation) Guidelines. (please describe in detail)
8.		will pay child support in the amount of \$ per
week	, as show	on by the attached child support worksheet, through the County Clerk's office, or by income
withh	nolding o	rder if available from the employer, beginning on the first Friday following the date of the decree
Said	date is	The custodial parent,, will be
respo	onsible fo	r the first \$ of uninsured medical expenses for the minor child(ren).
There	eafter, Fa	ther shall be responsible for% of uninsured medical expenses, and Mother shall be
respo	onsible fo	r% of uninsured medical expenses for the minor child(ren).
		will be responsible to pay the Administrative Fee that the Clerk charges
	- 11	

•	The pa	The parties have agreed on the following provisions for health insurance maintenance:						
	throug							
10.	The pa	arties have agreed on the following arrangement fo	or claiming the tax credits, exemptions, and					
deduc	tions for	r the minor child(ren):						
		Petitioner shall be entitled to claim the minor chi	ld(ren) for federal, state, and local income tax					
		purposes on an annual basis; Respondent shall sign all necessary documents that will entitle						
		Petitioner to do so.						
		Respondent shall be entitled to claim the minor child(ren) for federal, state, and local income tax						
		purposes on an annual basis; Petitioner shall sign	all necessary documents that will entitle					
		Respondent to do so.						
		Petitioner and Respondent shall each be entitled	to claim the minor child(ren) for federal, state,					
		and local income tax purposes in alternating year	rs; Petitioner shall be entitled to claim the minor					
		child(ren) in the year, and every even/	odd year thereafter; Respondent shall be entitled					
		to claim the minor child(ren) in the year	_, and every even/odd year thereafter.					
11.	The pa	arties have agreed on the following debt division:						
		The parties already have divided their debts.						
		Petitioner will be solely responsible for and shall	hold Respondent harmless from, the following					
		debts:						
		Name of Creditor	Amount of Debt					
			\$					
			\$					
			¢					

		Respondent will be solely responsible	e for, and shall hold Petitic	oner harmless from the following					
		debts:							
		Name of Creditor	Amount of	f <u>Debt</u>					
			\$						
			\$						
			\$						
12.	The pa	arties have agreed on the following vel	nicle division:						
		There are no vehicles to divide.							
		Petitioner will have sole possession of the following vehicles, and Respondent shall execute all							
		documents necessary to transfer title	of said vehicles within thin	rty (30) days of the date of this					
		Order:							
		Vehicle #1, Make, Model, and Year							
		Vehicle #2, Make, Model, and Year							
		Respondent will have sole possession	n of the following vehicles	, and Petitioner shall execute all					
		documents necessary to transfer title	of said vehicles within thin	rty (30) days of the date of this					
		Order:							
		Vehicle #1, Make, Model, and Year							
		Vehicle #2, Make, Model, and Year							
13.	The pa	The parties have agreed on the following property division:							
		☐ The parties already have divided all items of property.							
		Petitioner will have sole possession of	of the following items of pr	roperty:					

		Respondent will have sole possession of the following items of property:					
14.	The m	narriage has suffered an irretrievable breakdown and should be dissolved.					
15.	Chang	ge of names:					
		Wife would like her maiden name or previous married name of					
		restored to her.					
		Wife does not want to change her name.					
	IT IS	THEREFORE ORDERED by the Court that the parties' marriage is hereby dissolved					
	Date	Judge					
Distr	ibution:						

STATE OF INDIANA	)	IN THE	SUPERIOR/CIRCUIT COURT
COUNTY OF	) SS: )	CASE NO	
IN RE THE MARRIAGE OF:			
Petitioner,			
V.			
Respondent.			
		<b>SUMMON</b>	<u>S</u>
	For D	oissolution of Marria	ge Cases Only]
The State of Indiana to Respondent:	:		
In order to participate in the attorney. In the event you do not er marriage can be dissolved by Decre contain a judgment against you and child/children, parenting time (visitative Decree may also require you to Court's Decree. If you do not enter proceedings.	proce ater a vece of the provi- ation) take a	edings, you must enwritten appearance was Court by default. sions regarding the with your child/chilactions or refrain frotten appearance, you	your marriage. The case is pending in the Court ter a written appearance in person or by your within sixty (60) days of the date hereof, your In the event a Decree is entered by default, it may custody of your child/children, support for your dren, distribution of assets, and payment of debts. In actions in order to carry out the terms of the a will receive no further notice of these petition filed herein not more than sixty (60) days
	-	Clerk,	County
The following manner of Service of Registered / Certified Service by Sheriff or Service by Sheriff at	d Mail 1 Indiv	to be sent by the Cl vidual at address sho	lerk

#### SHERIFF'S RETURN OF SERVICE OF SUMMONS

I hereby	certify th	at I have served this	summons on the	day	/ of	,	20	<u>:</u>	
1	1. By	By delivering a copy of the Summons and a copy of the complaint to the Respondent identified							
on the fi	irst page o	of Summons.							
2	2. By leaving a copy of the Summons and a copy of the complaint at								
			, which	is the dw	elling place o	or usual place	of abo	de of <u>and</u> by	
mailing	a copy of	the Summons to the	Respondent at th	e above a	ddress.				
3	3. Otl	her Service or Reman	ks:						
_	Sh	eriff's Costs	She By	eriff					
			2)	Depu					
		_	RK'S CERTIFI	_					
I hereby certify that on the day of					, 20, 1	I mailed a co	py of th	is Summons	
and a co	ppy of the	Petition to the Respo	ondent identified of	on the firs	t page of the S	Summons by	(registe	ered or	
certified	l mail), [	] requesting a retu	rn receipt, at the a	ddress pr	ovided by the	Petitioner.			
Dated:		, 20							
Dated		, 20	Ву	Depu					
		RETURN	ON SERVICE	OF SUM	MONS BY M	IAIL			
I	I hereby co	ertify that the attache	ed receipt was rec	eived by r	ne showing th	nat the Summ	ions and	l a copy of	
the Com	nplaint ma	iled to the Responde	nt identified on th	ne 1 <sup>st</sup> page	of this Sumn	nons was acc	epted b	y the	
Respond	dent on the	e day of		, 20	_·				
I	I hereby co	ertify that the attache	ed return receipt v	as receiv	ed by me show	wing that the	Summo	ons and a	
copy of	the Comp	laint was returned no	ot accepted on the	· c	lay of		, 20_	•	
I	I hereby co	ertify that the attache	ed return receipt v	as receiv	ed by me show	wing that the	Summo	ons and a	
copy of	the Comp	laint mailed to the R	espondent identif	ied on the	1st page of th	is Summons	was ac	cepted by	
		on behalf of	the Respondent o	n the	day of		_, 20	·	
			Cle By						
			Бу		ty				